GLENN COUNTY Planning & Community Development Services Agency

225 N Tehama Street Willows, CA 95988 530.934.6546 www.countyofglenn.net



BUILDING PERMIT APPLICATION REQUIREMENTS FOR DEMOLITIONS

Note: A building permit must be obtained for the demolition of any building or a portion thereof. This requirement includes mobile/manufactured/modular homes on a permanent foundation, single-family dwellings, garages, storage units, commercial buildings, etc.

1) Completed Glenn County Development/Building permit application.

Please furnish the assessor's parcel number for the project.

- 2) Completed Demolition Permit Asbestos Notification Statement if required. Applicants must sign this form indicating whether or not written asbestos notification to the State is required for their demolition.
 - Please review the attached Asbestos Notification Statement to determine if an "Asbestos NESHAP Notification of Demolition and Renovation Form" must be filed prior to your demolition.
 - If an Asbestos Notification Form is required for your project, a copy of the completed form must be attached to the Demolition Permit Asbestos Notification Statement and submitted along with your building permit application.
- 3.) Plot plan (see included sample)

PLEASE NOTE: Payment is required when you apply for a building permit. We take payment in the form of credit card or check.

^{*}When filed, this application and all supporting material becomes subject to the California Public Records Act All public information related to this application is subject to public inspection and may be posted on the County's website for electronic access.



DEVELOPMENT PERMIT APPLICATION

MANUFACTURED HOME – YES NO

PROPERTY OWNER / APPLICANT INFO	ORMATION
LANDOWNER'S NAME:	ASSESSOR'S PARCEL #:
LANDOWNERS MAILING ADDRESS:	
APPLICANTS NAME & ADDRESS:	
PROJECT ADDRESS:	
DETAILED PROJECT DESCRIPTION:	
ELECTRICAL: PLUMBING: MECHANICAL: BUILDING USE:	OWNER EMAIL:
I HEREBY AFFIRM UNDER PENALTY OF PERJURY THAT THE INFORMATON PROVIDED HEREIN IS TRUE AND CORRECT:	
SIGNATURE:	DATE:
CONTRACTOR INTORMATIO	
CONTRACTOR INFORMATIO	
CONTRACTOR ADDRESS.	
CONTRACTOR ADDRESS: CONTRACT PRICE: \$ EMAIL:	
APPLICANT TO CONTACT ALL DEPARTMENTS BELOW FOR ANY REQUIREMEN	TS PRIOR TO APPLYING FOR A BUILDING PERMIT
PLANNING DIVISION	D.4.
APPLICATION #: FLOOD ZONE: FLOOD MA	
ZONING: REQUIRED SETBACKS: FRONT: SIDE: COMMENT.	
PLOT PLAN/ SITE PLAN APPROVAL: YES: NO: COMMENT: AGRICULTURAL STATEMENT: YES: NO: COMMENT:	
APPROVED FOR ISSUANCE BY:	
ATTROVED FOR ISSUANCE BT.	DAIL.
ENVIRONMENTAL HEALTH DEPAI	RTMENT
PROJECT COMPATIBLE WITH WELL: YES:	NO: N.F.A.R.:
	NO: N.F.A.R.:
	NO: N.F.A.R.:
APPROVED FOR ISSUANCE BY:	DATE:
PUBLIC WORKS DIVISION	
PROJECT HAS BEEN SUBMITTED FOR REVIEW AND APPLICANT HAS APPLIED FOR THE FOLL	
APPLICATION #:	OWING PERMITS:
ENCROACHMENT: IMPROVEMENT PLAN CHECK: IMPROVEMENT INSPEC	CTION: LANDLEVELING:
APPROVED FOR ISSUANCE BY:	DATE:
-	
AIR POLLUTION CONTROL DIST	TRICT
COMMERCIAL CONSTRUCTION AND ANY WORK WHICH WILL EMIT AIRBORNE PARTICULAT	TES MUST BE CLEARED THROUGH THE DEPARTMENT OF
AIR POLLUTION CONTROL IN CONNECTION WITH POLLUTION CONTROL REGULATIONS. APPROVED FOR ISSUANCE BY:	DATE:
ATTROVED FOR ISSUANCE BT.	DAIL.
FIRE AUTHORITY	
FIRE DISTRICT HAS REVIEWED AND APP	ROVED THIS APPLICATION FOR DEVELOPMENT PERMIT
(NAME OF DISTRICT) ADDROVED FOR ISSUANCE DV.	DATE.
APPROVED FOR ISSUANCE BY:	DATE:
PRIOR TO APPLYING FOR A BUILDING PERMIT APPLICANT TO CONTACT ALL	DEPARTMENTS ABOVE FOR ANY REQUIREMENTS
BUILDING INSPECTION DIVIS	ION
APPLICATION #: PLOT PLAN REQUIRED: YES:	
# OF PLANS TO BE FURNISHED: DESIGN OCC. LOAD: CONS	
SCHOOL FEES REQUIRED: YES: NO: SCHOOL DISTRICT:	
APPROVED FOR ISSUANCE BY:	DATE:

How do I get a Building Permit?

First - Prepare!

Prior to submitting for a building permit, check with the following departments. <u>If requirements of other</u> <u>departments cannot be met, a building permit will not be issued.</u>

1. Check Planning/Zoning regulations and fees.

Prior to submitting for a building permit, you will need to contact the Planning Department staff in order to determine if your property is zoned for the type of project you want to do and for any permits and fees involved at Planning@countyofglenn.net.

2. Check Environmental Health regulations and fees.

Prior to submitting for a building permit, contact the Environmental Health Department in order to determine if there are regulations that may affect your project and for any permits and fees involved at Environmental@countyofglenn.net.

3. Check Public Works regulations and fees

Prior to submitting for a building permit, contact the Public Works Department to determine if there are regulations that may affect your project and for any permits and fees involved publicworks@countyofglenn.net.

4. Check Air Pollution Control District regulations and fees

Prior to submitting for a building permit, contact the Air Pollution Control District to determine if there are regulations that may affect your project and for any permits and fees involved at APCD@countyofglenn.net.

5. Check with your Fire Authority regulations and fees

Prior to submitting for a building permit, contact your Fire Authority to determine if there are regulations that may affect your project and for any permits and fees involved.

6. Check your flood zone

Check your flood zone at: <u>FEMA Map Service Center</u>. If your home is in a flood zone there will be additional FEMA requirements and costs that may affect your project.

7. Prepare Application Forms, Plans and Supplemental Documents

Prepare a complete building permit application using the **Building Permit Application Completeness Checklist**. **All** required documents must be submitted together as a **complete package**. *Incomplete submittals will not be accepted*. Contact the Building Department to determine if there are regulations that may affect your project and for any fees involved.

Ready to Apply?

Apply

After contacting the above departments and confirming your project will be able to proceed, you will need to gather the development permit application, plans and all supplemental documents (See #7 above). All plans and supplemental documentation are to be provided digitally to gcbuilding@countyofglenn.net.

Pay intake fees

Once plans have been screened for completeness, building department staff will notify you of the plan review fee cost.

Plan Check Review

County and/or outside agency staff review your project to check that it is complete and complies with code requirements. If being reviewed by the outside agency, instructions will be provided on how and where to download your plans for review. If corrections are required, resubmit your plans and documents as instructed by either the County building division or outside agency.

Final Building Permit payment

Once all county departments have approved the project, building department staff will notify you of the final building permit fees due.

Permit Issuance

Permits may be signed by the property owner (with completion of the Owner-Builder form), the authorized agent for the property owner (with completion of the Owner-Builder form), Licensed contractors and an authorized agents for the licensed contractor (if agents has provided a current letter of authorization from the contractor). Instructions will be given on how to download your approved permit, plans and other documentation.

ASBESTOS NOTIFICATION STATEMENT

Demolition Proj	ject Loca	tion:							
Assessor's Par	cel Numb	per of Den	nolition F	Project:					
Pursuant to demolition perm						and	Safety	Code,	all
county, or state building or other each written as submitted to the agency, or both the successor copy of the wapplicable to the applicant to make the successor of the wapplicant to make the successor of the wapplicant to make the supplicant to make the supplicant to supplicate the supplicant to supplicate the supplicant to supplicate the supplication of the suppl	e or local er structu sbestos re United h, pursuato that paritten none schednake the le demoliersede a	agency were except notification States En art. The pertification uled demonstration permition pe	hich is a upon the regard vironmer 61 of Termit ma if the a olition properties on in wat applicate ment of	e receipt from the build ing the build intal Protection itle 40 of the y be issued pplicant decroject. The priting, or it ition. Complifederal law."	issue de mathe pe ding that on Agende Code de without clares the permitting may in ance without ance without the may in the without the may in	emolitice rmit appear to be found for the end the appear the grade ager corporch this	on permi poplicant of peen req population a designeral Reg poplicant see notification prate the presention section section section section.	ts as to of a copured to plated submitting ation is require applica shall not	any y of be tate , or ig a not the nt's t be
Attached is a c which I have se California Air R	ent to bo	th the US							
Signature					Date				
				<u>OR</u>					
I hereby declar Agency is not a					o the US	S Envi	ronment	al Prote	ction
Signature					Date				

Revised 9/29/2022 1 of 1



POSTMARK:	
DATE RECEIVED:	
NOTIFICATION #:	

ASBESTOS NESHAP NOTIFICATION OF DEMOLITION AND RENOVATION FORM

Attention – This Form is for Non-Delegated Air Districts in California Only (More Information http://www.arb.ca.gov/enf/asbestos/asbestos.htm)

1. TYPE OF NOTIFICATION: (check one) ORIGINAL CANCELLE	E D	REV	ISION	(IF REVISIO	N, WR	ITE REVISION	#:)
II. FACILITY INFORMATION (Identify Owner, Ren	oval Contra	ctor, and O	ther Operator)			
Owner Name:							
Address:							
City:		Cour	nty:	State:	7	ZIP:	
Contact:		L			1	Telephone:	
Asbestos Removal Contractor:							
Address:							
City:				State:	7	ZIP:	
Contact:		Telepl	none:		1	Title:	
Demolition Contractor:		l .					
Address:							
City:				State:	7	ZIP:	
Contact:		Telepl	none:		1	Title:	
III. TYPE OF OPERATION: (check one) DEMOLITION ORDERED	DEMOLITI	ON	RENOV	ATION		EMERGENCY	RENOVATION
IV. IS ASBESTOS PRESENT? (check one) YES NO Please attach Asbestos Inspection Report (40 CFR 61.1 V. NAME OF FACILITY AND DESCRIPTION:	Wh			aterials are Goi			
Address:							
		Com	.4	State:		ZIP:	
City:		Cour	ny:	State:		Zir;	
Site Location:							
Building Size:		Number o	f Floors:		Age i	in Years:	
Current Use:		Prior Use	(s):				
VI. PROCEDURE, INCLUDING ANALYTICAL ME	THOD USE	D TO DETE	CT THE PRE	SENCE OF ASI	BESTO	S MATERIAL:	
VII. APPROXIMATE AMOUNT OF ASBESTOS CONTAINING MATERIAL (ACM), INCLUDING:	ASBESTOS CONTAINING		N	MATERIAL BE REMOVED		NONFRIABLE ASBESTOS MATERIAL NOT TO BE REMOVED	
	MATERIA TO BE R	LS (RACM) EMOVED	Category I	Category	II	Category I	Category II
Pipes (Linear Feet):							
Surface Area (Square Feet):							
Volume RACM Off Facility Component (Cubic Feet):							
VIII. SCHEDULED DATES OF DEMOLITION (N	/M/DD/YY)	Star	rt:	Co	mplet	te:	
IX. SCHEDULED DATES OF ASBESTOS REMOVA	AL (MM/DI	D/YY) Star	rt:	Co	mplet	te:	
W	eekday Wo	rk Hours:		Weeken	d Work	Hours:	

x. DESCRIPTION OF PLANNED DEMOLITION OR RENOVATION WOR	RK, AND METHO	DD(S) TO BE USI	ED:
XI. DESCRIPTION OF WORK PRACTICES AND ENGINEERING CONTRO THE DEMOLITION AND RENOVATION SITE:	LS TO BE USED	TO PREVENT	EMISSIONS OF ASBESTOS AT
XII. WASTE TRANSPORTER:			
Name:			
Address:			
City:	- :	State:	ZIP:
Contact Person:		Telephone:	
XIII. NAME OF WASTE DISPOSAL SITE:			
Address:			
City:	- :	State:	Zip:
Telephone:			
XIV. IF DEMOLITION ORDERED BY A GOVERNMENT AGENCY, PLEAS	E IDENTIFY TH	E AGENCY BEI	LOW:
Name:	Tit	tle:	
Authority:			
Date of Order (MM/DD/YY):	te Ordered to Begi	in (MM/DD/YY):	
XV. FOR EMERGENCY RENOVATIONS			
a) Date and Hour of Emergency (MM/DD/YY):			
b) Description of the Sudden, Unexpected Event:			
c) Explanation of how the event caused unsafe conditions or would cause equi	nment damage or	an unreasonable	financial burden:
, ,	.		
XVI. DESCRIPTION OF PROCEDURES TO BE FOLLOWED IN THE EVEN PREVIOUSLY NONFRIABLE ASBESTOS MATERIAL BECOMES CRUMBI			
XVII. I CERTIFY THAT AN INDIVIDUAL TRAINED IN THE PROVISIONS	OF THIS DECI	I ATION (40 CE)	D DADT 61 SUDDADT M. WILL
BE ON-SITE DURING THE DEMOLITION OR RENOVATION AND EVIDE ACCOMPLISHED BY THIS PERSON WILL BE AVAILABLE FOR INSPECT YEAR AFTER PROMULGATION)	NCE THAT THE	REQUIRED TR	AINING HAS BEEN
(SIGNATURE OF OWNER/OPERATOR) XVIII. I CERTIFY THAT THE ABOVE INFORMATION IS CORRECT.			(DATE)
(SIGNATURE OF OWNER/OPERATOR)			(DATE)

PLEASE ATTACH ASBESTOS INSPECTION REPORT

GLENN COUNTY Planning & Community Development Services Agency

225 N Tehama St. Willows, CA 95988 530.934.6546 www.countyofglenn.net



IMPORTANT INFORMATION FROM THE UNITED STATES ENVIRONMENTAL PROTECTION AGENCY NEW REGULATION ON LEAD

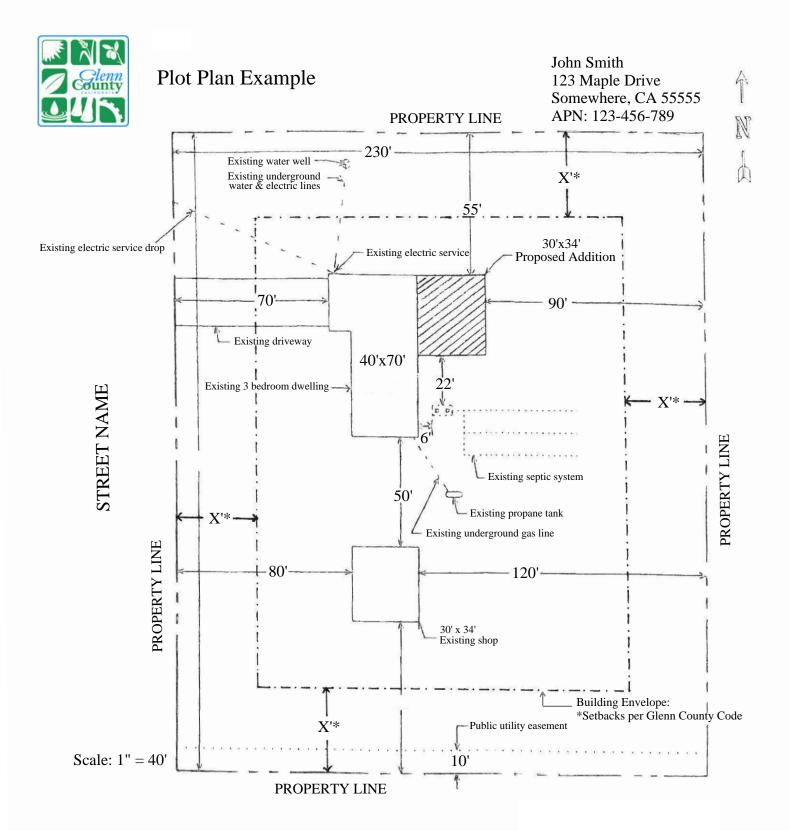
Effective October 1, 2010: The new rule requires that contractors and maintenance professional's working on pre-1978 housing, child care facilities, and schools with lead based paint be certified; that their employees be trained and that they follow protective work practice standards. The rule applies to renovation, repair, or painting activities affecting more than six (6) square feet of lead-based paint in a room or more than twenty (20) square feet of lead-based paint on the exterior. Enforcement of this rule began October 1, 2010. See EPA website at www.epa.gov/lead for more information.

Glenn County Planning & Community Development Services will require that the attached certification form be completed for all permits involving paint on pre-1978 homes, child care facilities or private schools.

LEAD PAINT NOTIFICATION STATEMENT

Project Address:

Assessor's Parcel Number:	
Based Paint Renovation, Repair, professionals working in pre-19 lead-based paint must be certi protective work practice stand painting activities affecting mor room or more than twenty (20)	Environmental Protection Agency (EPA) Lead-, and Painting Rule, contractors and maintenance 78 housing, child care facilities, and schools with fied and their employees be trained and follow lards. This rule applies to renovation, repair, or the than six (6) square feet of lead-based paint in a square feet of lead based paint on the exterior.
Signature:	Date:
	-OR-
I hereby declare that no lead-ba	ased paint is present.
Signature:	Date:
	-OR-
	ration, repair, or painting activities will not affect lead-based paint in a room or more than twenty paint on the exterior.
Signature:	Date:



PLEASE SHOW THE FOLLOWING ON YOUR PLOT PLAN:

- ✓ Location and distance between proposed and existing buildings.
- ✓ Building setback distances from proposed project to all property lines.
- ✓ Building Envelope, with correct setback distances per Glenn County Code.
- ✓ Location of sewage systems (proposed and existing).
- ✓ Water supply or well location.
- ✓ Easements (roads or utilities).

- ✓ North direction arrow.
- ✓ All adjacent street names.
- ✓ Plot plan scale size.
- ✓ Name of property owner.
- ✓ Address of proposed project.
- ✓ Assessor Parcel Number (APN).

SITE PLAN CHECKLIST

The following information must be on your site plan before our department can begin processing your application.

INFORMATION NEEDED FOR COMPLETE MAP	ITEM COMPLETE	ITEM NEEDED	ITEM NOT REQUIRED
Size: The Site Plan must be drawn on minimum 11'x17' material.			
North Arrow, Date and Scale: Use an engineer's scale (i.e., 1" to 20' or 1" to 40', preferred).			
Streets and Easements: Location and names of all streets and easements bordering on the property with access details.			
Property Lines: All property lines or boundary lines of the parcel with dimensions. Boundary monuments must be exposed for inspection			
Existing and Proposed Development. All existing structures (labeled "existing") and any proposed structures (labeled "proposed") with dimensions, square footage and distances from other structures and property lines. The use should be labeled on each structure.			
ACCESS - Parking, Driveways, Bridges: The location, dimensions and surface material of all existing and proposed parking, driveways, and bridges.			
Please show SRA Turn Outs, Turnarounds, and include length in all dimensions of access (driveway, bridge, etc.)			
Water Wells: The location of existing and proposed water wells on-site			
If public water will be utilized, a "will-serve" letter must be submit from the service provider.			
Sewers and Septic Tanks: The location of the sewer outlet, public sewer hook-up, or existing and proposed sewage disposal systems			
If public sewage disposal will be utilized, a "will-serve" letter must be submit from the service provider for new development.			
Storm Drainage: The location of existing and proposed storm drainage facilities (check with Engineering staff regarding design criteria). If subject to flooding, the 100-year flood elevations must be shown. Indicate any unusual topographic features of the site (e.g. steep slopes, or drainage courses).			
Landscaping: The location of existing and proposed landscaping and trees 6" or greater in diameter (note any trees to be removed). Show all proposed landscaping.			
Signs, Fences, Storage and Trash Enclosures: The location of and height of all existing and proposed signs and fences and the location and dimensions of all open and /or enclosed storage and trash receptacles.			
Grading and Contours need to be shown.			
SITE PLANS MUST BE COMPLETE AND LEGIBLE			
Before applying, check your Site Plan to make sure that it contains all of the information cited above. You are encouraged to have one of our counter staff review your draft Site Plan prior to having copies run.			
Faint prints and light blue lines cannot be accepted because they cannot be reproduced or microfilmed.			
DEVISED 0/07/0000	•	•	•

Construction Waste Management Plan – CW 1

Proje	ct Name:
Proje	ct Location:
Build	ing Permit Number:
Proje	ct Square Feet:
	actors Name:
Contr	actor's Telephone Number:
Owne	ers Name:
Owne	er's Telephone Number:
	construction waste management plan is hereby submitted to comply with on 4.408 of the 2022 California Green Building Standards Code.
minim jurisdi	urpose of this plan is to identify and outline the methods to be used as the num requirements for a construction waste management plan when the local iction does not have a construction and demolition waste management ance per Section 4.408.
1.	The method of waste tracking to be used on this project will be: (Check one box.)
	□Volume □Weight
	☐Four pounds per square feet ☐Recycling Facility
2.	Construction waste generated on this project for transport to a recycling facility will be: (Check appropriate box.)
	☐Sorted on-site (Source-separated)
	☐Bulk mixed (Single stream)
3.	The facility (or facilities) where the construction waste material will be taken is:
	Name of Facility:
	Address:
	Facilities Telephone:
	(Attach separate sheet for additional facilities)

4.	The following construction methods will be used to reduce the amount of waste generated: (Check all that apply.)
	☐ Efficient design (dimensions of building components are designed to available material sizes or standard sizes).
	☐Careful and accurate material ordering.
	☐Careful material handling and storage.
	☐Panelized or prefabricated construction.
	☐Other
	Other
5.	Waste reduction and recycling strategies shall be discussed at periodic project meetings. Each new that comes onto the site shall be provided with a copy of the Construction
	Waste Management Plan (CWMP), which shall also be posted in the project office. The
	shall also instruct allas to the location and proper use of debris boxes for disposal of construction waste materials.
6.	Every effort shall be made to use recycling and/or reuse (diversion) measures to reduce the amount of construction waste and other materials sent to landfills. Whenever possible, site-sorted debris boxes shall be used to segregate construction waste materials to maximize the diversion rate.
7.	Theshall provide debris boxes for materials sorted on-site (source-separated) and/or bulk mixed (single stream) waste for all construction related waste generated on this project. Mixed construction waste shall be taken to a recycling facility that has a diversion rate of at least 65 percent.
	In the event that a provides their own debris box, they shall be responsible for providing the
	with a monthly report of the total Recycled and Reused (Diverted) and the total Non-Recycled (Disposed) materials to be included in the project's overall waste management/waste reduction program.
8.	Any hauling away packaging or waste materials shall notify the of the amount of these materials and how they will be disposed of (reused, recycled, salvaged, or taken to landfill).

9.	Identified below are the construction waste materials that will be reused
	and/or recycled during the course of this project and how they will be
	diverted:

Material	Diversion Method: (Recycle/Reuse)

(See Construction Waste Management Worksheets for examples of common materials.)

10.	The	shall track the total amount of
	construction waste leaving the proje	ect by weight or by volume and supply
	the	with copies of tickets or detailed
	receipts from all loads of construction	on waste removed from the jobsite.
11.	The management, recycling, and reuse of ensure compliance with the CWMP	
12.	The	•

Construction Waste Management Plan - CW-1 (Revised 09/2020)

^{*} Insert title of appropriate party or responsible person, which may include, but not be limited to: Contractor(s), Subcontractor(s), Project Manager(s), Superintendent(s), Supplier(s), or Waste Hauler(s).